Montana Communicable Disease Weekly Update: 03/12/10

DISEASE INFORMATION

Summary – Week 9 – Ending 03/06/10 – Disease reports received at DPHHS during the reporting period February 28 - March 6, 2010 included the following:

- Vaccine Preventable Diseases: Varicella (3)
- Enteric Diseases: Campylobacteriosis (1), Cryptosporidiosis (1), non-0157 STEC (1)
- Other Conditions: None
- Travel Related Conditions: None

NOTE: The report has multiple pages reflecting the following information: (1) vaccine preventable and enteric diseases YTD; (2) other communicable diseases YTD; (3) cases just this week; (4) clusters and outbreaks; and (5) an STD summary.

NEW! Surveillance Snippets – Serologic Testing for Acute Infection

Some diseases are detected using serologic assays. Many of these diseases like vector-borne diseases, and many vaccine preventable diseases, require TWO blood specimens in order to confirm that the disease in question is recently acquired. IgM and IgG antibodies in the blood are measured to determine whether a person's infection is recently acquired.

- In general, a high IgM titer is an indicator of a specific and recent infection.
- However, IgG is also used to confirm a recent infection. A four-fold increase in the IgG titer from the time an acute specimen is drawn (within one week of onset of disease) to when a convalescent specimen is drawn (2-4 weeks after onset of disease), indicates a recent infection.
- When testing for a recent infection, IgM AND IgG testing on paired sera (acute/convalescent) is best.

Disease Status	IgM	Acute IgG	Convalescent IgG
Recent infection	High	Not present or low	Four-fold increase
Past Infection	Low or not detectable	Present	No or slight increase

* General information; disease specific criteria should be used when determining timing for IgM and IgG testing

Many thanks to Denise Higgins, Montana Public Health Laboratory, for her assistance in writing this "snippet".

THE "BUZZ"

RSV - Increased levels of RSV activity are being reported nationwide and around the state at this time. Respiratory syncytial virus (RSV) is the most common cause of bronchiolitis and pneumonia in children aged <1 year worldwide, some of which is severe and requires hospitalization. In addition, RSV is also responsible for severe respiratory disease in those >65 years old. In the U.S., RSV season generally begins during the fall and continues through the winter and spring, but the exact timing of RSV circulation varies by location and year. Data from the National Respiratory and Enteric Virus Surveillance System (NREVSS) are used to monitor the occurrence of RSV in the U.S. http://www.cdc.gov/surveillance/nrevss/rsv/state.html. Although individual cases of RSV are not reportable in Montana, outbreaks (>3 cases clustered by time/location) are. More information on RSV: www.cdc.gov/rsv

Influenza

Montana – Activity level in Montana for week 9 is **NO ACTIVITY.** *Interpret positive rapid influenza tests with caution at this time.* A positive screening test result is most likely to be truly positive during periods of peak influenza activity in the population tested. A positive screening test result is most likely to be falsely positive during periods of low influenza activity in the population tested, including early and late in the influenza season. A confirmatory test such as PCR or viral culture should be considered (IDSA Guidelines-http://www.journals.uchicago.edu/doi/pdf/10.1086/598513). Current information on influenza testing by the Montana Public Health Laboratory can be found at http://www.dphhs.mt.gov/PHSD/Lab/environ-lab-index.shtml.

United States - During week 9 (03/06/10), influenza activity stayed at the same level as the previous week. (http://www.cdc.gov/flu/weekly/)

Diarrheal Disease and Food Recalls

NEW! **Hydrolyzed Vegetable Protein Product Recalls** - The U.S. Food and Drug Administration is actively investigating findings of *Salmonella* Tennessee in hydrolyzed vegetable protein (HVP) manufactured by Basic Food Flavors, Inc., in Las Vegas, NV. HVP is a flavor enhancer used in a wide variety of processed food products, such as soups, sauces, chilis, stews, hot dogs, gravies, seasoned snack foods, dips, and dressings. **At this time, no illnesses associated with this contamination have been reported to the FDA.**

Updates: http://www.fda.gov/Safety/Recalls/MajorProductRecalls/HVP/default.htm

Norovirus – Montana continues to experience increased levels of norovirus activity. Guidance documents can be found at: http://www.dphhs.mt.gov/PHSD/epidemiology/cdepi-norovirus.shtml.

INFORMATION / ANNOUNCEMENTS

NEW! **2008 Antibiogram** – The 2008 cumulative state antibiogram, results from a survey of 34 laboratories from across Montana, is now available at http://mara.mt.gov/documents/2008Antibiogram.pdf. Questions? Jan Stetzer at jstetzer@mt.gov or 406.444.0695

24/7 AVAILABILITY

The Communicable Disease Epidemiology program is available 24 hours a day/7days a week/365 days a year. Please call 406.444.0273 if you need immediate communicable disease epidemiology assistance. The answering service will take a message and we will return the call as quickly as possible.

This newsletter is produced by the Montana Communicable Disease Epidemiology Program. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: *http://cdepi.hhs.mt.gov*.